

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

RELY ON YOUR BELIEFS FUND

ADDRESS (number and street)

ONE CONSTITUTION AVE NE STE 300

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344648

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y
08 15 2017in the
State of

AL

(d) 30-Day

POST-Election

Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
07 01 2017

through

M M / D D / Y Y Y Y Y Y
07 26 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

KILGORE, PAUL, , ,

Type or Print Name of Treasurer

Signature of Treasurer

KILGORE, PAUL, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
08 03 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

RELY ON YOUR BELIEFS FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017		164110.12
(b) Cash on Hand at Beginning of Reporting Period.....	239067.95	
(c) Total Receipts (from Line 19)	31000.00	362765.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	270067.95	526875.87
7. Total Disbursements (from Line 31).....	16226.43	273034.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	253841.52	253841.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

RELY ON YOUR BELIEFS FUND

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2017

To:

M M	/	D D	/	Y Y Y Y Y Y
07	/	26	/	2017

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

18250.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

18250.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

31000.00

344500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

31000.00

362750.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

15.75

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

31000.00

362765.75

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

31000.00

362765.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	16226.43	248034.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16226.43	248034.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16226.43	273034.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16226.43	273034.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	31000.00	362750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31000.00	362750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16226.43	248034.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16226.43	248034.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)

Mailing Address 1445 NEW YORK AVENUE NW
 STE 800

City State Zip Code
 WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : AF8C815223198435C833

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE STREET
 SUITE 225

City State Zip Code
 ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : A1275778F46574838BA5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 SOUTH PROSPECT AVE
 C/O FINANCE DEPARTMENT

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : AFA7CBD6BC67F4D9BA42

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 13

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City
WASHINGTON

State
DC

Zip Code
20004

FEC ID number of contributing
federal political committee.

C C00284885

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : ADDB64C50213C4F2F97F

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASSOCIATION OF AMERICAN RAILROADS POLITICAL ACTION COMMITTEE (RAILPAC)

Mailing Address 425 3RD STREET, S..W.
SUITE 1000

City
WASHINGTON

State
DC

Zip Code
20024

FEC ID number of contributing
federal political committee.

C C00280743

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : A31BB89D892C74B54A3B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AETNA INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 F STREET, N.W.
SUITE 350

City
WASHINGTON

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C C00181826

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : AD824D0FAD190494892A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 13
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. U.S. TRAVEL ASSOCIATION PAC

Mailing Address 1100 NEW YORK AVENUE
SUITE 450W

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C C00457754

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : A7C52E81A2BB840FFB52

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C C00236489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

07 / **17** / **2017**

Transaction ID : A82423D7B0FF349D3929

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

31000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		05		2017

Mailing Address 824 S MILLEDGE AVE STE 101

City
ATHENSState
GAZip Code
30605Purpose of Disbursement
PAC COMPLIANCE SERVICES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B67788ABE0

Amount of Each Disbursement this Period

1558.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NORFOLK SOUTHERN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2017

Mailing Address ONE CONSTITUTION AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
PAC RENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B5EB77C8C0

Amount of Each Disbursement this Period

975.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RESTAURANT ASSOCIATES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2017

Mailing Address PO BOX 91337

City
CHICAGOState
ILZip Code
60693Purpose of Disbursement
PAC MEETING EXPENSES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B54F37AEFE

Amount of Each Disbursement this Period

410.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2943.32

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. BLUE SKY TECH

Mailing Address PO BOX 3663

City
JACKSONState
WYZip Code
83001Purpose of Disbursement
PAC IT SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	7		

FEC Identification Number

C**Transaction ID : BF418B5505/**

Amount of Each Disbursement this Period

112.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1100 WILSON BLVD FL10

City
ARLINGTONState
VAZip Code
22209-2249Purpose of Disbursement
PAC DIGITAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	1	7		

FEC Identification Number

C**Transaction ID : BE085118246**

Amount of Each Disbursement this Period

7200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VISA

Mailing Address PO BOX 4512

City
CAROL STREAMState
ILZip Code
60197Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	3			2	0	1	7		

FEC Identification Number

C**Transaction ID : BDA29B056C**

Amount of Each Disbursement this Period

4213.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11526.22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. OCEAN PRIME DC

Mailing Address 1341 G ST NW

City
WASHINGTONState
DCZip Code
20005-3105Purpose of Disbursement
PAC EVENT CATERING

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	3			2	0	1	7		

FEC Identification Number

C**Transaction ID : B1980508225**

Amount of Each Disbursement this Period

4088.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UPS

Mailing Address PO BOX 72470244

City
PHILADELPHIAState
PAZip Code
19170Purpose of Disbursement
PAC SHIPPING

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	3			2	0	1	7		

FEC Identification Number

C**Transaction ID : B4ED9329E0f**

Amount of Each Disbursement this Period

98.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CITI CARDS

Mailing Address PO BOX 183037

City
COLUMBUSState
OHZip Code
43218Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	7			2	0	1	7		

FEC Identification Number

C**Transaction ID : B4A250F5E8**

Amount of Each Disbursement this Period

1625.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1625.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. SENATE DINING ROOM

Mailing Address US CAPITOL BUILDING

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
PAC MEETING EXPENSES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2017

FEC Identification Number

C

Transaction ID : B59F62A9EF

Amount of Each Disbursement this Period

268.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. COLONIAL HOUSES

Mailing Address PO BOX 1776

City
WILLIAMSBURGState
VAZip Code
23187-1776Purpose of Disbursement
PAC LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2017

FEC Identification Number

C

Transaction ID : B23762921E6

Amount of Each Disbursement this Period

854.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
PAC TRAVEL EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2017

FEC Identification Number

C

Transaction ID : BA8C56EB0

Amount of Each Disbursement this Period

42.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 13

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. BLUNT, ROY, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2017

Mailing Address PO BOX 50100

City
SPRINGFIELDState
MOZip Code
65805-0100Purpose of Disbursement
SEE MEMO ENTRY

Candidate Name

BLUNT, ROY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Category/
Type

FEC Identification Number

C S0MO00183**Transaction ID : BDF4E4CC27**

Amount of Each Disbursement this Period

131.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT-A-CAR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2017

Mailing Address 398 MEETING ST.

City
CHARLESTONState
SCZip Code
29403Purpose of Disbursement
PAC CAR RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C**Transaction ID : B6186017CDI**

Amount of Each Disbursement this Period

131.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

131.25

16226.43